



Future of Florida's Families Committee

**Tuesday, April 4, 2006
10:15 AM – 11:00 AM
12 House Office Building**

ACTION PACKET



Florida House of Representatives

Future of Florida's Families Committee

Bill Galvano
Chair

AGENDA
April 4, 2006
10:15 AM – 11:00 AM
12 HOB

Opening Remarks by Chair Galvano

Consideration of the following bills:

HB 1033 – Child Abuse by Rep. Vana

HB 1275 – Adoption Benefits by Rep. Cusack

HB 1327 – Transition Services for Adolescents and Young Adults with Disabilities
by Rep. D. Davis

HB 1365 – Florida Healthy Kids Corporation Act by Rep. M. Davis

HB 1423 – Children's Health Insurance by Rep. Bucher

HB 1495 – Marriage Licenses by Rep. Arza

Closing Remarks by Chair Galvano

COMMITTEE MEETING REPORT
Future of Florida's Families Committee
4/4/2006 10:15:00AM

Location: 12 HOB

Attendance:

	<i>Present</i>	<i>Absent</i>	<i>Excused</i>
Bill Galvano (Chair)	X		
Rafael Arza	X		
Aaron Bean	X		
Susan Bucher	X		
Mike Davis	X		
Richard Glorioso			X
Susan Goldstein	X		
Will Kendrick	X		
Totals:	7	0	1

Committee meeting was reported out: Tuesday, April 04, 2006 11:31:07AM

COMMITTEE MEETING REPORT
Future of Florida's Families Committee
4/4/2006 10:15:00AM

Location: 12 HOB

HB 1033 : Child Abuse

☒ *Favorable With Committee Substitute*

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Rafael Arza	X				
Aaron Bean	X				
Susan Bucher	X				
Mike Davis	X				
Richard Glorioso			X		
Susan Goldstein	X				
Will Kendrick	X				
Bill Galvano (Chair)				X	
Total Yeas: 6 Total Nays: 0					

Committee meeting was reported out: Tuesday, April 04, 2006 11:31:07AM

COMMITTEE MEETING REPORT
Future of Florida's Families Committee
4/4/2006 10:15:00AM

Location: 12 HOB

HB 1275 : Adoption Benefits

☒ *Favorable With Committee Substitute*

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Rafael Arza	X				
Aaron Bean	X				
Susan Bucher	X				
Mike Davis	X				
Richard Glorioso			X		
Susan Goldstein	X				
Will Kendrick	X				
Bill Galvano (Chair)				X	
Total Yeas: 6 Total Nays: 0					

Committee meeting was reported out: Tuesday, April 04, 2006 11:31:07AM

COMMITTEE MEETING REPORT
Future of Florida's Families Committee
4/4/2006 10:15:00AM

Location: 12 HOB

HB 1327 : Transition Services for Adolescents and Young Adults with Disabilities

☒ *Favorable With Committee Substitute*

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Rafael Arza	X				
Aaron Bean	X				
Susan Bucher	X				
Mike Davis	X				
Richard Glorioso			X		
Susan Goldstein	X				
Will Kendrick	X				
Bill Galvano (Chair)				X	
Total Yeas: 6 Total Nays: 0					

Committee meeting was reported out: Tuesday, April 04, 2006 11:31:07AM

COMMITTEE MEETING REPORT
Future of Florida's Families Committee
4/4/2006 10:15:00AM

Location: 12 HOB

HB 1365 : Florida Healthy Kids Corporation Act

☒ *Favorable With Committee Substitute*

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Rafael Arza	X				
Aaron Bean	X				
Susan Bucher	X				
Mike Davis	X				
Richard Glorioso			X		
Susan Goldstein	X				
Will Kendrick	X				
Bill Galvano (Chair)				X	
Total Yeas: 6 Total Nays: 0					

Appearances:

Florida Healthy Kids Corporation Act
Karen Woodall (Lobbyist) - Proponent
Farmworker Assoc. of FL
579 E. Call St.
Tallahassee FL 32301
Phone: 850.222.7607

Committee meeting was reported out: Tuesday, April 04, 2006 11:31:07AM

COMMITTEE MEETING REPORT
Future of Florida's Families Committee
4/4/2006 10:15:00AM

Location: 12 HOB

HB 1423 : Children's Health Insurance

☒ *Favorable With Committee Substitute*

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Rafael Arza	X				
Aaron Bean	X				
Susan Bucher	X				
Mike Davis	X				
Richard Glorioso			X		
Susan Goldstein	X				
Will Kendrick	X				
Bill Galvano (Chair)	X				
Total Yeas: 7		Total Nays: 0			

Appearances:

Children's Health Insurance

Paul Wharton (Lobbyist) - Proponent

Florida Pediatric Society

2356 Jose Circle North

Jacksonville FL 32217

Phone: 904.563.0627

Committee meeting was reported out: Tuesday, April 04, 2006 11:31:07AM

COMMITTEE MEETING REPORT
Future of Florida's Families Committee
4/4/2006 10:15:00AM

Location: 12 HOB
HB 1495 : Marriage Licenses

☒ *Favorable*

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Rafael Arza	X				
Aaron Bean	X				
Susan Bucher	X				
Mike Davis	X				
Richard Glorioso			X		
Susan Goldstein	X				
Will Kendrick		X			
Bill Galvano (Chair)				X	
Total Yeas: 5 Total Nays: 1					

Committee meeting was reported out: Tuesday, April 04, 2006 11:31:07AM

COMMITTEE MEETING REPORT
Future of Florida's Families Committee
4/4/2006 10:15:00AM

Location: 12 HOB

Summary:

Future of Florida's Families Committee

Tuesday April 04, 2006 10:15 am

HB 1033	Favorable With Committee Substitute	Yeas: 6	Nays: 0
HB 1275	Favorable With Committee Substitute	Yeas: 6	Nays: 0
HB 1327	Favorable With Committee Substitute	Yeas: 6	Nays: 0
HB 1365	Favorable With Committee Substitute	Yeas: 6	Nays: 0
HB 1423	Favorable With Committee Substitute	Yeas: 7	Nays: 0
HB 1495	Favorable	Yeas: 5	Nays: 1

Committee meeting was reported out: Tuesday, April 04, 2006 11:31:07AM

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

Bill No. **HB 1033**

COUNCIL/COMMITTEE ACTION

ADOPTED	<input type="checkbox"/> (Y/N)
ADOPTED AS AMENDED	<input type="checkbox"/> (Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/> (Y/N)
FAILED TO ADOPT	<input type="checkbox"/> (Y/N)
WITHDRAWN	<input type="checkbox"/> (Y/N)
OTHER	<input type="checkbox"/>

Council/Committee hearing bill: Future of Florida's Families
Committee

Representative(s) Vana offered the following:

Amendment (with title amendment)

Remove everything after the enacting clause and insert:

Section 1. Paragraph (e) of subsection (2) of section
39.001, Florida Statutes, is amended to read:

39.001 Purposes and intent; personnel standards and
screening.--

(2) DEPARTMENT CONTRACTS.--The department may contract with
the Federal Government, other state departments and agencies,
county and municipal governments and agencies, public and
private agencies, and private individuals and corporations in
carrying out the purposes of, and the responsibilities
established in, this chapter.

(e) The department shall develop and implement a written
and performance-based testing and evaluation program to ensure
measurable competencies of all employees assigned to report,
manage, or supervise cases of child abuse, abandonment, and
neglect. All employees assigned to report, manage, or supervise

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

cases of child abuse, abandonment, and neglect shall complete a 1-hour continuing education course on child abuse each year.

Section 2. Paragraph (b) of subsection (1) of section 39.201, Florida Statutes, is amended to read:

39.201 Mandatory reports of child abuse, abandonment, or neglect; mandatory reports of death; central abuse hotline.--

(1)

(b) Reporters licensed or regulated by the state and their employees who are mandatory reporters are required to complete a 1-hour continuing education course on child abuse each year, except for reporters in subparagraphs 1. and 2. Reporters in the following occupation categories are required to provide their names to the hotline staff:

1. Physician, osteopathic physician, medical examiner, chiropractic physician, nurse, or hospital personnel engaged in the admission, examination, care, or treatment of persons;

2. Health or mental health professional other than one listed in subparagraph 1.;

3. Practitioner who relies solely on spiritual means for healing;

4. School teacher or other school official or personnel;

5. Social worker, day care center worker, or other professional child care, foster care, residential, or institutional worker;

6. Law enforcement officer; or

7. Judge.

The names of reporters shall be entered into the record of the report, but shall be held confidential and exempt as provided in s. 39.202.

Section 3. This act shall take effect July 1, 2006.

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

===== T I T L E A M E N D M E N T =====

Remove the entire title and insert:

A bill to be entitled

An act relating to child abuse; amending ss. 39.001 and 39.201, F.S.; requiring all Department of Children and Family Services employees and persons in specified occupation categories assigned to report, manage, or supervise cases of child abuse, abandonment, and neglect to annually complete a continuing education course; providing for exceptions; providing an effective date.

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

Bill No. HB 1275

COUNCIL/COMMITTEE ACTION

ADOPTED	___ (Y/N)
ADOPTED AS AMENDED	___ (Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/> (Y/N)
FAILED TO ADOPT	___ (Y/N)
WITHDRAWN	___ (Y/N)
OTHER	_____

Council/Committee hearing bill: Future of Florida's Families
Committee

Representative(s) Cusack offered the following:

Amendment

Remove everything after the enacting clause and insert:

Section 1. Section 110.152, Florida Statutes, is amended
to read:

110.152 Adoption benefits for qualifying adoptive parents
~~state employees~~; parental leave.--

(1) As used in this section, the term "qualifying adoptive
parent" means a full-time or part-time employee of:

(a) The state, including a full-time or part-time employee
of the State University System;

(b) Any community college in the state; and

(c) Any county school district in the state, including
teachers.

(2) ~~(1)~~ (a) Any qualifying adoptive parent ~~full-time or
part-time employee of the state who is paid from regular salary
appropriations and who adopts a special-needs child, as defined
in paragraph (b), is eligible to receive a monetary benefit in
the amount of \$10,000 per child, which is payable in equal~~

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

23 monthly installments over a 1-year period. Any qualifying
24 adoptive parent ~~employee of the state~~ who adopts a child whose
25 permanent custody has been awarded to the Department of Children
26 and Family Services or to a Florida-licensed child-placing
27 agency, other than a special-needs child as defined in paragraph
28 (b), shall be eligible to receive a monetary benefit in the
29 amount of \$5,000 per child, which is payable in equal monthly
30 installments over a 1-year period. Benefits paid under this
31 subsection to a part-time employee must be prorated based on the
32 employee's full-time-equivalency status at the time of applying
33 for the benefits.

34 (b) For purposes of this section, a "special-needs child"
35 is a child whose permanent custody has been awarded to the
36 Department of Children and Family Services or to a Florida-
37 licensed child-placing agency and who is not likely to be
38 adopted because he or she is:

- 39 1. Eight years of age or older.
- 40 2. A person with a developmental disability.
- 41 3. A person with a physical or emotional handicap.
- 42 4. Of a minority race or of a racially mixed heritage.
- 43 5. A member of a sibling group of any age, provided that
44 two or more members of a sibling group remain together for the
45 purposes of adoption.

46 ~~(3)(2)~~ A qualifying adoptive parent ~~An employee of the~~
47 ~~state~~ who adopts a special-needs child must apply to his or her
48 agency head to obtain the monetary benefit provided in
49 subsection (2) ~~(1)~~. Applications must be on forms approved by
50 the department and must include a certified copy of the final
51 order of adoption naming the applicant as the adoptive parent.

52 ~~(4)(3)~~ Nothing in This section does not ~~shall~~ affect the
53 right of any qualifying adoptive parent ~~state employee~~ who

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

54 adopts a special-needs child to receive financial aid for
55 adoption expenses under ~~pursuant to~~ s. 409.166 or any other
56 statute that provides financial incentives for the adoption of
57 children.

58 ~~(5)(4)~~ Any qualifying adoptive parent ~~employee of the~~
59 ~~state~~ who has a child placed in the custody of the adopting
60 parent ~~employee~~ for adoption, and who continues to reside in the
61 same household as the child placed for adoption, shall be
62 granted parental leave for a period not to exceed 6 months as
63 provided in s. 110.221.

64 Section 2. Section 110.15201, Florida Statutes, is amended
65 to read:

66 110.15201 Adoption benefits for qualifying adoptive
67 parents ~~state employees~~; rulemaking authority.--The Department
68 of Management Services may adopt rules to administer the
69 provisions of this act. The ~~Such~~ rules may provide for an
70 application process such as, but not limited to, an open
71 enrollment period during which qualifying adoptive parents
72 ~~employees~~ may apply for monetary benefits as provided in s.
73 110.152 (2) ~~(1)~~.

74 Section 3. This act shall take effect July 1, 2006.

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES
Amendment No. 1

Bill No. **HB 1327**

COUNCIL/COMMITTEE ACTION

ADOPTED	<input type="checkbox"/> (Y/N)
ADOPTED AS AMENDED	<input type="checkbox"/> (Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/> (Y/N)
FAILED TO ADOPT	<input type="checkbox"/> (Y/N)
WITHDRAWN	<input type="checkbox"/> (Y/N)
OTHER	<input type="checkbox"/>

Council/Committee hearing bill: Future of Florida's Families
Committee

Representative(s) D. Davis offered the following:

Amendment (with title amendment)

Between lines 26 and 27, insert:

(2) The pilot program, in consultation with Children's
Medical Services, shall develop collaborative partnerships with
the public and private entities specified in this section to
administer and implement the pilot program. Participation in the
program by such entities is voluntary. However, an entity that
participates in the program must comply with the requirements of
this section.

===== T I T L E A M E N D M E N T =====

On page 1, line 7, after the semicolon, insert:
providing for the development of collaborative partnerships with
certain entities;

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

Bill No. **HB 1365**

COUNCIL/COMMITTEE ACTION

ADOPTED	<input type="checkbox"/> (Y/N)
ADOPTED AS AMENDED	<input checked="" type="checkbox"/> (Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/> (Y/N)
FAILED TO ADOPT	<input type="checkbox"/> (Y/N)
WITHDRAWN	<input type="checkbox"/> (Y/N)
OTHER	<input type="checkbox"/>

1 Council/Committee hearing bill: Future of Florida's Families
2 Committee

3 Representative(s) M. Davis offered the following:

4
5 **Amendment (with title amendment)**

6 Remove everything after the enacting clause and insert:

7 Section 1. Section 409.811, Florida Statutes, is amended
8 to read:

9 409.811 Definitions relating to Florida KidCare Act.--As
10 used in ss. 409.810-409.820, the term:

11 (1) "Actuarially equivalent" means that:

12 (a) The aggregate value of the benefits included in health
13 benefits coverage is equal to the value of the benefits in the
14 benchmark benefit plan; and

15 (b) The benefits included in health benefits coverage are
16 substantially similar to the benefits included in the benchmark
17 benefit plan, except that preventive health services must be the
18 same as in the benchmark benefit plan.

19 (2) "Agency" means the Agency for Health Care
20 Administration.

21 (3) "Applicant" means a parent or guardian of a child or a
22 child whose disability of nonage has been removed under chapter

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

743, who applies for determination of eligibility for health benefits coverage under ss. 409.810-409.820.

(4) "Benchmark benefit plan" means the form and level of health benefits coverage established in s. 409.815.

(5) "Child" means any person under 19 years of age.

(6) "Child with special health care needs" means a child whose serious or chronic physical or developmental condition requires extensive preventive and maintenance care beyond that required by typically healthy children. Health care utilization by such a child exceeds the statistically expected usage of the normal child adjusted for chronological age, and such a child often needs complex care requiring multiple providers, rehabilitation services, and specialized equipment in a number of different settings.

(7) "Children's Medical Services Network" or "network" means a statewide managed care service system as defined in s. 391.021(1).

(8) "Community rate" means a method used to develop premiums for a health insurance plan that spreads financial risk across a large population and allows adjustments only for age, gender, family composition, and geographic area.

(9) "Department" means the Department of Health.

(10) "Enrollee" means a child who has been determined eligible for and is receiving coverage under ss. 409.810-409.820.

(11) "Enrollment ceiling" means the maximum number of children receiving premium assistance payments, excluding children enrolled in Medicaid, that may be enrolled at any time in the Florida KidCare program. The maximum number shall be established annually in the General Appropriations Act or by general law.

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

54 (12) "Family" means the group or the individuals whose
55 income is considered in determining eligibility for the Florida
56 KidCare program. The family includes a child with a custodial
57 parent or caretaker relative who resides in the same house or
58 living unit or, in the case of a child whose disability of
59 nonage has been removed under chapter 743, the child. The family
60 may also include other individuals whose income and resources
61 are considered in whole or in part in determining eligibility of
62 the child.

63 (13) "Family income" means cash received at periodic
64 intervals from any source, such as wages, benefits,
65 contributions, or rental property. Income also may include any
66 money that would have been counted as income under the Aid to
67 Families with Dependent Children (AFDC) state plan in effect
68 prior to August 22, 1996.

69 (14) "Florida KidCare program," "KidCare program," or
70 "program" means the health benefits program administered through
71 ss. 409.810-409.820.

72 (15) "Guarantee issue" means that health benefits coverage
73 must be offered to an individual regardless of the individual's
74 health status, preexisting condition, or claims history.

75 (16) "Health benefits coverage" means protection that
76 provides payment of benefits for covered health care services or
77 that otherwise provides, either directly or through arrangements
78 with other persons, covered health care services on a prepaid
79 per capita basis or on a prepaid aggregate fixed-sum basis.

80 (17) "Health insurance plan" means health benefits
81 coverage under the following:

82 (a) A health plan offered by any certified health
83 maintenance organization or authorized health insurer, except a
84 plan that is limited to the following: a limited benefit,

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

specified disease, or specified accident; hospital indemnity; accident only; limited benefit convalescent care; Medicare supplement; credit disability; dental; vision; long-term care; disability income; coverage issued as a supplement to another health plan; workers' compensation liability or other insurance; or motor vehicle medical payment only; or

(b) An employee welfare benefit plan that includes health benefits established under the Employee Retirement Income Security Act of 1974, as amended.

(18) "Healthy Kids" means a component of the Florida KidCare program of medical assistance for children 5 through 18 years of age as authorized under s. 624.91 and administered by the Florida Healthy Kids Corporation.

(19) "Maximum income threshold" means a percentage of the current federal poverty level used to determine eligibility for certain program components, as approved by federal waiver or an amendment to the state plan.

(20)~~(18)~~ "Medicaid" means the medical assistance program authorized by Title XIX of the Social Security Act, and regulations thereunder, and ss. 409.901-409.920, as administered in this state by the agency.

(21)~~(19)~~ "Medically necessary" means the use of any medical treatment, service, equipment, or supply necessary to palliate the effects of a terminal condition, or to prevent, diagnose, correct, cure, alleviate, or preclude deterioration of a condition that threatens life, causes pain or suffering, or results in illness or infirmity and which is:

(a) Consistent with the symptom, diagnosis, and treatment of the enrollee's condition;

(b) Provided in accordance with generally accepted standards of medical practice;

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

116 (c) Not primarily intended for the convenience of the
117 enrollee, the enrollee's family, or the health care provider;

118 (d) The most appropriate level of supply or service for
119 the diagnosis and treatment of the enrollee's condition; and

120 (e) Approved by the appropriate medical body or health
121 care specialty involved as effective, appropriate, and essential
122 for the care and treatment of the enrollee's condition.

123 ~~(22)-(20)~~ "Medikids" means a component of the Florida
124 KidCare program of medical assistance authorized by ~~Title XXI of~~
125 ~~the Social Security Act, and regulations thereunder, and s.~~
126 409.8132, as administered in the state by the agency.

127 ~~(23)-(21)~~ "Preexisting condition exclusion" means, with
128 respect to coverage, a limitation or exclusion of benefits
129 relating to a condition based on the fact that the condition was
130 present before the date of enrollment for such coverage, whether
131 or not any medical advice, diagnosis, care, or treatment was
132 recommended or received before such date.

133 ~~(24)-(22)~~ "Premium" means the entire cost of a health
134 insurance plan, including the administration fee or the risk
135 assumption charge.

136 ~~(25)-(23)~~ "Premium assistance payment" means the monthly
137 consideration paid by the agency per enrollee in the Florida
138 KidCare program towards health insurance premiums.

139 ~~(26)-(24)~~ "Qualified alien" means an alien as defined in s.
140 431 of the Personal Responsibility and Work Opportunity
141 Reconciliation Act of 1996, as amended, Pub. L. No. 104-193.

142 ~~(27)-(25)~~ "Resident" means a United States citizen, or
143 qualified alien, who is domiciled in this state.

144 ~~(28)-(26)~~ "Rural county" means a county having a population
145 density of less than 100 persons per square mile, or a county
146 defined by the most recent United States Census as rural, in

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

which there is no prepaid health plan participating in the Medicaid program as of July 1, 1998.

~~(29)~~~~(27)~~ "Substantially similar" means that, with respect to additional services as defined in s. 2103(c)(2) of Title XXI of the Social Security Act, these services must have an actuarial value equal to at least 75 percent of the actuarial value of the coverage for that service in the benchmark benefit plan and, with respect to the basic services as defined in s. 2103(c)(1) of Title XXI of the Social Security Act, these services must be the same as the services in the benchmark benefit plan.

Section 2. Subsections (6) and (7) of section 409.8132, Florida Statutes, are amended to read:

409.8132 Medikids program component.--

(6) ELIGIBILITY.--

(a) A child who has attained the age of 1 year but who is under the age of 5 years is eligible to enroll in the Medikids program component of the Florida KidCare program, if the child is a member of a family that has a family income which exceeds the Medicaid applicable income level as specified in s. 409.903, but which is equal to or below the maximum income threshold 200 percent of the current federal poverty level. In determining the eligibility of ~~such~~ a child, an assets test is not required. A child who is eligible for Medikids may elect to enroll in Florida Healthy Kids coverage or employer-sponsored group coverage. However, a child who is eligible for Medikids may participate in the Florida Healthy Kids program only if the child has a sibling participating in the Florida Healthy Kids program and the child's county of residence permits such enrollment.

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

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177 (b) The provisions of s. 409.814(3), (4), ~~and~~ (5), and (6)
178 are ~~shall be~~ applicable to the Medikids program.

179 (7) ENROLLMENT.--Enrollment in the Medikids program
180 component may occur at any time throughout the year. A child may
181 not receive services under the Medikids program until the child
182 is enrolled in a managed care plan or MediPass. Once determined
183 eligible, an applicant may receive choice counseling and select
184 a managed care plan or MediPass. The agency may initiate
185 mandatory assignment for a Medikids applicant who has not chosen
186 a managed care plan or MediPass provider after the applicant's
187 voluntary choice period ends. An applicant may select MediPass
188 under the Medikids program component only in counties that have
189 fewer than two managed care plans available to serve Medicaid
190 recipients and only if the federal Centers for Medicare and
191 Medicaid Services Health Care Financing Administration
192 determines that MediPass constitutes "health insurance coverage"
193 as defined in Title XXI of the Social Security Act.

194 Section 3. Subsection (2) of section 409.8134, Florida
195 Statutes, is amended to read:

196 409.8134 Program enrollment and expenditure ceilings.--

197 (2) The Florida KidCare program may conduct enrollment at
198 any time throughout the year for the purpose of enrolling
199 children eligible for all program components listed in s.
200 409.813 except Medicaid. The four Florida KidCare administrators
201 shall work together to ensure that the year-round enrollment
202 period is announced statewide. Eligible children shall be
203 enrolled on a first-come, first-served basis using the date the
204 enrollment application is received. Enrollment shall immediately
205 cease when the enrollment ceiling is reached. Year-round
206 enrollment shall only be held if the Social Services Estimating
207 Conference determines that sufficient ~~federal and state~~ funds

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

will be available to finance the increased enrollment ~~through~~
~~federal fiscal year 2007~~. Any individual who is not enrolled
must reapply by submitting a new application. The application
for the Florida KidCare program is ~~shall be~~ valid for a period
of 120 days after the date it was received. At the end of the
120-day period, if the applicant has not been enrolled in the
program, the application is ~~shall be~~ invalid and the applicant
shall be notified of the action. The applicant may resubmit the
application after notification of the action taken by the
program. Except for the Medicaid program, whenever the Social
Services Estimating Conference determines that there are
presently, or will be by the end of the current fiscal year,
insufficient funds to finance the current or projected
enrollment in the Florida KidCare program, all additional
enrollment must cease and additional enrollment may not resume
until sufficient funds are available to finance the ~~such~~
enrollment.

Section 4. Section 409.814, Florida Statutes, is amended
to read:

409.814 Eligibility.--A child who has not reached 19 years
of age whose family income is equal to or below the maximum
income threshold ~~200 percent of the federal poverty level~~ is
eligible for the Florida KidCare program as provided in this
section. For enrollment in the Children's Medical Services
Network, a complete application includes the medical or
behavioral health screening. If, subsequently, an individual is
determined to be ineligible for coverage, he or she must
immediately be disenrolled from the respective Florida KidCare
program component.

(1) A child who is eligible for Medicaid coverage under s.
409.903 or s. 409.904 must be enrolled in Medicaid and is not

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 1

239 eligible to receive health benefits under any other health
240 benefits coverage authorized under the Florida KidCare program.

241 (2) A child who is not eligible for Medicaid, but who is
242 eligible for the Florida KidCare program, may obtain health
243 benefits coverage under any of the other components listed in s.
244 409.813 if such coverage is approved and available in the county
245 in which the child resides. However, a child who is eligible for
246 Medikids may participate in the Florida Healthy Kids program
247 only if the child has a sibling participating in the Florida
248 Healthy Kids program and the child's county of residence permits
249 such enrollment.

250 (3) A child who is eligible for the Florida KidCare
251 program who is a child with special health care needs, as
252 determined through a medical or behavioral screening instrument,
253 is eligible for health benefits coverage from and shall be
254 referred to the Children's Medical Services Network.

255 (4) The following children are not eligible to receive
256 federal premium assistance for health benefits coverage under
257 the Florida KidCare program, except under Medicaid if the child
258 would have been eligible for Medicaid under s. 409.903 or s.
259 409.904 as of June 1, 1997:

260 (a) A child who is eligible for coverage under a state
261 health benefit plan on the basis of a family member's employment
262 with a public agency in the state.

263 (b) A child who is currently eligible for or covered under
264 a family member's group health benefit plan or under other
265 employer health insurance coverage, excluding coverage provided
266 under the Florida Healthy Kids Corporation as established under
267 s. 624.91, provided that the cost of the child's participation
268 is not greater than 5 percent of the family's income. This
269 provision shall be applied during redetermination for children

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who were enrolled prior to July 1, 2004. These enrollees shall have 6 months of eligibility following redetermination to allow for a transition to the other health benefit plan.

(c) A child who is seeking premium assistance for the Florida KidCare program through employer-sponsored group coverage, if the child has been covered by the same employer's group coverage during the 6 months prior to the family's submitting an application for determination of eligibility under the program.

(d) A child who is an alien, but who does not meet the definition of qualified alien, in the United States.

(e) A child who is an inmate of a public institution or a patient in an institution for mental diseases.

(f) A child who has had his or her coverage in an employer-sponsored health benefit plan voluntarily canceled in the last 6 months, except those children who were on the waiting list prior to March 12, 2004.

(g) A child who is otherwise eligible for KidCare and who has a preexisting condition that prevents coverage under another insurance plan as described in paragraph (b) which would have disqualified the child for KidCare if the child were able to enroll in the plan shall be eligible for KidCare coverage when enrollment is possible.

(5) Subject to a specific appropriation for this purpose, the following children are eligible to receive nonfederal premium assistance for health benefits coverage under the Florida KidCare program, except under Medicaid, if the child would have been eligible for Medicaid under s. 409.903 or s. 409.904 as of June 1, 1997:

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299 (a) A child who is eligible for coverage under a state
300 health benefit plan on the basis of a family member's employment
301 with a public agency in the state.

302 (b) A child who is an alien, but who does not meet the
303 definition of qualified alien, in the United States.

304 ~~(6)(5)~~ A child whose family income is above the maximum
305 income threshold ~~200 percent of the federal poverty level~~ or a
306 child who is excluded under the provisions of subsection (4) may
307 participate in the Florida KidCare program, excluding the
308 Medicaid program, but is subject to the following provisions:

309 (a) The family is not eligible for premium assistance
310 payments and must pay the full cost of the premium, including
311 any administrative costs.

312 (b) The agency is authorized to place limits on enrollment
313 in Medikids by these children in order to avoid adverse
314 selection. The number of children participating in Medikids
315 whose family income exceeds the maximum income threshold ~~200~~
316 ~~percent of the federal poverty level~~ must not exceed 10 percent
317 of total enrollees in the Medikids program.

318 (c) The board of directors of the Florida Healthy Kids
319 Corporation is authorized to place limits on enrollment of these
320 children in order to avoid adverse selection. In addition, the
321 board is authorized to offer a reduced benefit package to these
322 children in order to limit program costs for such families. The
323 number of children participating in the Florida Healthy Kids
324 program whose family income exceeds the maximum income threshold
325 ~~200 percent of the federal poverty level~~ must not exceed 10
326 percent of total enrollees in the Florida Healthy Kids program.

327 (d) Children described in this subsection are not counted
328 in the annual enrollment ceiling for the Florida KidCare
29 program.

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330 (7)~~(6)~~ Once a child is enrolled in the Florida KidCare
331 program, the child is eligible for coverage under the program
332 for 12 months without a redetermination or reverification of
333 eligibility, if the family continues to pay the applicable
334 premium. Eligibility for program components funded through Title
335 XXI of the Social Security Act shall terminate when a child
336 attains the age of 19. Effective January 1, 1999, a child who
337 has not attained the age of 5 and who has been determined
338 eligible for the Medicaid program is eligible for coverage for
339 12 months without a redetermination or reverification of
340 eligibility.

341 (8)~~(7)~~ When determining or reviewing a child's eligibility
342 under the Florida KidCare program, the applicant shall be
343 provided with reasonable notice of changes in eligibility which
344 may affect enrollment in one or more of the program components.
345 When a transition from one program component to another is
346 authorized, there shall be cooperation between the program
347 components and the affected family which promotes continuity of
348 health care coverage. Any authorized transfers must be managed
349 within the program's overall appropriated or authorized levels
350 of funding. Each component of the program shall establish a
351 reserve to ensure that transfers between components will be
352 accomplished within current year appropriations. These reserves
353 shall be reviewed by each convening of the Social Services
354 Estimating Conference to determine the adequacy of such reserves
355 to meet actual experience.

356 (9)~~(8)~~ In determining the eligibility of a child, an
357 assets test is not required. Each applicant shall provide
358 written documentation during the application process and the
359 redetermination process, including, but not limited to, the
360 following:

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361 (a) Proof of family income, which must include a copy of
362 the applicant's most recent federal income tax return. In the
363 absence of a federal income tax return, an applicant may submit
364 wages and earnings statements (pay stubs), W-2 forms, or other
365 appropriate documents.

366 (b) A statement from all family members that:

367 1. Their employer does not sponsor a health benefit plan
368 for employees; or

369 2. The potential enrollee is not covered by the employer-
370 sponsored health benefit plan because the potential enrollee is
371 not eligible for coverage, or, if the potential enrollee is
372 eligible but not covered, a statement of the cost to enroll the
373 potential enrollee in the employer-sponsored health benefit
374 plan.

375 ~~(10)(9)~~ Subject to paragraph (4)(b) and s. 624.91(3), the
376 Florida KidCare program shall withhold benefits from an enrollee
377 if the program obtains evidence that the enrollee is no longer
378 eligible, submitted incorrect or fraudulent information in order
379 to establish eligibility, or failed to provide verification of
380 eligibility. The applicant or enrollee shall be notified that
381 because of such evidence program benefits will be withheld
382 unless the applicant or enrollee contacts a designated
383 representative of the program by a specified date, which must be
384 within 10 days after the date of notice, to discuss and resolve
385 the matter. The program shall make every effort to resolve the
386 matter within a timeframe that will not cause benefits to be
387 withheld from an eligible enrollee.

388 ~~(11)(10)~~ The following individuals may be subject to
389 prosecution in accordance with s. 414.39:

390 (a) An applicant obtaining or attempting to obtain
91 benefits for a potential enrollee under the Florida KidCare

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program when the applicant knows or should have known the potential enrollee does not qualify for the Florida KidCare program.

(b) An individual who assists an applicant in obtaining or attempting to obtain benefits for a potential enrollee under the Florida KidCare program when the individual knows or should have known the potential enrollee does not qualify for the Florida KidCare program.

Section 5. Subsection (3) of section 409.816, Florida Statutes, is amended to read:

409.816 Limitations on premiums and cost-sharing.--The following limitations on premiums and cost-sharing are established for the program.

(3) Enrollees in families with a family income above 150 percent of the federal poverty level, who are not receiving coverage under the Medicaid program or who are not eligible under s. 409.814(6) ~~s. 409.814(5)~~, may be required to pay enrollment fees, premiums, copayments, deductibles, coinsurance, or similar charges on a sliding scale related to income, except that the total annual aggregate cost-sharing with respect to all children in a family may not exceed 5 percent of the family's income. However, copayments, deductibles, coinsurance, or similar charges may not be imposed for preventive services, including well-baby and well-child care, age-appropriate immunizations, and routine hearing and vision screenings.

Section 6. Subsection (3) of section 409.818, Florida Statutes, is amended to read:

409.818 Administration.--In order to implement ss. 409.810-409.820, the following agencies shall have the following duties:

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422 (3) The Agency for Health Care Administration, under the
423 authority granted in s. 409.914(1), shall:

424 (a) Calculate the premium assistance payment necessary to
425 comply with the premium and cost-sharing limitations specified
426 in s. 409.816. The premium assistance payment for each enrollee
427 in a health insurance plan participating in the Florida Healthy
428 Kids Corporation shall equal the premium approved by the Florida
429 Healthy Kids Corporation and the Office of Insurance Regulation
430 of the Financial Services Commission pursuant to ss. 627.410 and
431 641.31, less any enrollee's share of the premium established
432 within the limitations specified in s. 409.816. The premium
433 assistance payment for each enrollee in an employer-sponsored
434 health insurance plan approved under ss. 409.810-409.820 shall
435 equal the premium for the plan adjusted for any benchmark
436 benefit plan actuarial equivalent benefit rider approved by the
437 Office of Insurance Regulation pursuant to ss. 627.410 and
438 641.31, less any enrollee's share of the premium established
439 within the limitations specified in s. 409.816. In calculating
440 the premium assistance payment levels for children with family
441 coverage, the agency shall set the premium assistance payment
442 levels for each child proportionately to the total cost of
443 family coverage.

444 (b) Annually calculate the program enrollment ceiling
445 based on estimated per child premium assistance payments and the
446 estimated appropriation available for the program.

447 (c) Make premium assistance payments to health insurance
448 plans on a periodic basis. The agency may use its Medicaid
449 fiscal agent or a contracted third-party administrator in making
450 these payments. The agency may require health insurance plans
451 that participate in the Medikids program or employer-sponsored
452 group health insurance to collect premium payments from an

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enrollee's family. Participating health insurance plans shall report premium payments collected on behalf of enrollees in the program to the agency in accordance with a schedule established by the agency.

(d) Monitor compliance with quality assurance and access standards developed under s. 409.820.

(e) Establish a mechanism for investigating and resolving complaints and grievances from program applicants, enrollees, and health benefits coverage providers, and maintain a record of complaints and confirmed problems. In the case of a child who is enrolled in a health maintenance organization, the agency must use the provisions of s. 641.511 to address grievance reporting and resolution requirements.

(f) Approve health benefits coverage for participation in the program, following certification by the Office of Insurance Regulation under subsection (4).

(g) Adopt rules necessary for calculating premium assistance payment levels, calculating the program enrollment ceiling, making premium assistance payments, monitoring access and quality assurance standards, investigating and resolving complaints and grievances, administering the Medikids program, and approving health benefits coverage.

The agency is designated the lead state agency for Title XXI of the Social Security Act for purposes of receipt of federal funds, for reporting purposes, and for ensuring compliance with federal and state regulations and rules. The agency shall seek approval from the federal Centers for Medicare and Medicaid Services for the highest maximum income threshold of up to 300 percent of the most recently stated federal poverty limit. Until the federal agency approves the request, the maximum income

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484 threshold used for the Florida KidCare program shall be 200
485 percent of the most recently stated federal poverty limit or the
486 highest income threshold allowed under current federal law. Any
487 such expansion under this subsection is subject to a specified
488 appropriation for such purpose.

489 Section 7. Section 409.821, Florida Statutes, is amended
490 to read:

491 409.821 Florida KidCare program public records exemption.-
492 -Notwithstanding any other law to the contrary, any information
493 identifying a Florida KidCare program applicant or enrollee, as
494 defined in s. 409.811, held by the Agency for Health Care
495 Administration, the Department of Children and Family Services,
496 the Department of Health, or the Florida Healthy Kids
497 Corporation is confidential and exempt from s. 119.07(1) and s.
498 24(a), Art. I of the State Constitution. Such information may be
499 disclosed to another governmental entity only if disclosure is
500 necessary for the entity to perform its duties and
501 responsibilities under the Florida KidCare program and shall be
502 disclosed to the Department of Revenue for purposes of
503 administering the state Title IV-D program. The receiving
504 governmental entity must maintain the confidential and exempt
505 status of such information. Furthermore, such information may
506 not be released to any person without the written consent of the
507 program applicant. This exemption applies to any information
508 identifying a Florida KidCare program applicant or enrollee held
509 by the Agency for Health Care Administration, the Department of
510 Children and Family Services, the Department of Health, or the
511 Florida Healthy Kids Corporation before, on, or after the
512 effective date of this exemption. A violation of this section is
513 a misdemeanor of the second degree, punishable as provided in s.
14 775.082 or s. 775.083. This section does not prohibit an

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515 enrollee's parent or legal guardian from obtaining confirmation
516 of coverage and dates of coverage.

517 Section 8. Subsections (3) and (5) of section 624.91,
518 Florida Statutes, are amended to read:

519 624.91 The Florida Healthy Kids Corporation Act.--

520 (3) ELIGIBILITY FOR NONFEDERAL STATE FUNDED ASSISTANCE.--

521 Only residents of this state between 5 and 18 years of age who
522 meet the qualifications for the Florida KidCare program under s.

523 409.814 are eligible for nonfederal assistance in the Florida

524 Healthy Kids program. the following individuals are eligible for
525 state funded assistance in paying Florida Healthy Kids premiums.

526 ~~(a) Residents of this state who are eligible for the~~
527 ~~Florida KidCare program pursuant to s. 409.814.~~

528 ~~(b) Notwithstanding s. 409.814, legal aliens who are~~
529 ~~enrolled in the Florida Healthy Kids program as of January 31,~~
530 ~~2004, who do not qualify for Title XXI federal funds because~~
531 ~~they are not qualified aliens as defined in s. 409.811.~~

532 ~~(c) Notwithstanding s. 409.814, individuals who have~~
533 ~~attained the age of 19 as of March 31, 2004, who were receiving~~
534 ~~Florida Healthy Kids benefits prior to the enactment of the~~
535 ~~Florida KidCare program. This paragraph shall be repealed March~~
536 ~~31, 2005.~~

537 ~~(d) Notwithstanding s. 409.814, state employee dependents~~
538 ~~who were enrolled in the Florida Healthy Kids program as of~~
539 ~~January 31, 2004. Such individuals shall remain eligible until~~
540 ~~January 1, 2005.~~

541 (5) CORPORATION AUTHORIZATION, DUTIES, PROMOTION, POWERS.-

542 -

543 (a) There is created the Florida Healthy Kids Corporation,
544 a not-for-profit corporation.

545 (b) The Florida Healthy Kids Corporation shall:

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46 1. Arrange for the collection of any family, local
547 contributions, or employer payment or premium, in an amount to
548 be determined by the board of directors, to provide for payment
549 of premiums for comprehensive insurance coverage and for the
550 actual or estimated administrative expenses.

551 ~~2. Arrange for the collection of any voluntary~~
552 ~~contributions to provide for payment of premiums for children~~
553 ~~who are not eligible for medical assistance under Title XXI of~~
554 ~~the Social Security Act. Each fiscal year, the corporation shall~~
555 ~~establish a local match policy for the enrollment of non Title~~
556 ~~XXI eligible children in the Healthy Kids program. By May 1 of~~
557 ~~each year, the corporation shall provide written notification of~~
558 ~~the amount to be remitted to the corporation for the following~~
559 ~~fiscal year under that policy. Local match sources may include,~~
560 ~~but are not limited to, funds provided by municipalities,~~
561 ~~counties, school boards, hospitals, health care providers,~~
562 ~~charitable organizations, special taxing districts, and private~~
563 ~~organizations. The minimum local match cash contributions~~
564 ~~required each fiscal year and local match credits shall be~~
565 ~~determined by the General Appropriations Act. The corporation~~
566 ~~shall calculate a county's local match rate based upon that~~
567 ~~county's percentage of the state's total non Title XXI~~
568 ~~expenditures as reported in the corporation's most recently~~
569 ~~audited financial statement. In awarding the local match~~
570 ~~credits, the corporation may consider factors including, but not~~
571 ~~limited to, population density, per capita income, and existing~~
572 ~~child health related expenditures and services.~~

573 2.3. Subject to the provisions of s. 409.8134, accept
574 voluntary supplemental local match contributions that comply
575 with the requirements of Title XXI of the Social Security Act

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for the purpose of providing additional coverage in contributing counties under Title XXI.

~~3.4.~~ Establish the administrative and accounting procedures for the operation of the corporation.

~~4.5.~~ Establish, with consultation from appropriate professional organizations, standards for preventive health services and providers and comprehensive insurance benefits appropriate to children, provided that the ~~such~~ standards for rural areas do ~~shall~~ not limit primary care providers to board-certified pediatricians.

~~5.6.~~ Determine eligibility for children seeking to participate in the ~~Title XXI-funded components of the Florida KidCare program consistent with the requirements specified in s. 409.814, as well as the non Title XXI-eligible children as provided in subsection (3).~~

~~6.7.~~ Establish procedures under which ~~providers of local match to,~~ applicants to and participants in the program may have grievances reviewed by an impartial body and reported to the board of directors of the corporation.

~~7.8.~~ Establish participation criteria and, if appropriate, contract with an authorized insurer, health maintenance organization, or third-party administrator to provide administrative services to the corporation.

~~8.9.~~ Establish enrollment criteria that ~~which shall~~ include penalties or waiting periods of not fewer than 60 days for reinstatement of coverage upon voluntary cancellation for nonpayment of family premiums.

~~9.10.~~ Contract with authorized insurers or any provider of health care services, meeting standards established by the corporation, for the provision of comprehensive insurance coverage to participants. Such standards shall include criteria

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under which the corporation may contract with more than one provider of health care services in program sites. Health plans shall be selected through a competitive bid process. The Florida Healthy Kids Corporation shall purchase goods and services in the most cost-effective manner consistent with the delivery of quality medical care. The maximum administrative cost for a Florida Healthy Kids Corporation contract shall be 15 percent. For health care contracts, the minimum medical loss ratio for a Florida Healthy Kids Corporation contract shall be 85 percent. For dental contracts, the remaining compensation to be paid to the authorized insurer or provider under a Florida Healthy Kids Corporation contract shall be no less than an amount which is 85 percent of premium; to the extent any contract provision does not provide for this minimum compensation, this section shall prevail. The health plan selection criteria and scoring system, and the scoring results, shall be available upon request for inspection after the bids have been awarded.

~~11. Establish disenrollment criteria in the event local matching funds are insufficient to cover enrollments.~~

~~10.12.~~ Develop and implement a plan to publicize the Florida Healthy Kids Corporation, the eligibility requirements of the program, and the procedures for enrollment in the program and to maintain public awareness of the corporation and the program. Participating health and dental plans may develop marketing and other promotional materials and participate in activities, such as health fairs and public events, as approved by the corporation. The health and dental plans may also contact their enrollees and former enrollees to encourage continued participation in the plan.

~~11.13.~~ Secure staff necessary to properly administer the corporation. Staff costs shall be funded from state and local

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638 matching funds and such other private or public funds as become
639 available. The board of directors shall determine the number of
640 staff members necessary to administer the corporation.

641 ~~12.14.~~ Provide a report annually to the Governor, Chief
642 Financial Officer, Commissioner of Education, Senate President,
643 Speaker of the House of Representatives, and Minority Leaders of
644 the Senate and the House of Representatives.

645 ~~13.15.~~ Establish benefit packages which conform to the
646 provisions of the Florida KidCare program, as created in ss.
647 409.810-409.820.

648 (c) Coverage under the corporation's program is secondary
649 to any other available private coverage held by, or applicable
650 to, the participant child or family member. Insurers under
651 contract with the corporation are the payors of last resort and
652 must coordinate benefits with any other third-party payor that
653 may be liable for the participant's medical care.

654 (d) The Florida Healthy Kids Corporation shall be a
655 private corporation not for profit, organized under ~~pursuant to~~
656 chapter 617, and shall have all powers necessary to carry out
657 the purposes of this act, including, but not limited to, the
658 power to receive and accept grants, loans, or advances of funds
659 from any public or private agency and to receive and accept from
660 any source contributions of money, property, labor, or any other
661 thing of value, to be held, used, and applied for the purposes
662 of this section ~~act~~.

663 Section 9. This act shall take effect July 1, 2006.

664 =====TITLE AMENDMENT=====

665 Remove the entire title and insert:

666 An act relating to the Florida KidCare program;
667 amending s. 409.811, F.S.; defining the terms "Healthy
668 Kids" and "maximum income threshold"; amending s.

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69 409.8132, F.S.; providing that eligibility for the Florida
670 KidCare program be at or below the maximum income
671 threshold rather than a specified percentage of the
672 federal poverty level; amending s. 409.8134, F.S.;
673 conforming provisions to changes made by the act; amending
674 s. 409.814, F.S.; requiring that eligibility for the
675 Florida KidCare program be at or below the maximum income
676 threshold rather than a specified percentage of the
677 federal poverty level; providing that certain specified
678 children are eligible for nonfederal premium assistance
679 for health insurance; providing that a child whose family
680 income is above the maximum income threshold may
681 participate in the Florida KidCare program but is subject
682 to certain conditions; amending s. 409.816, F.S.;
683 conforming a cross-reference; amending s. 409.818, F.S.;
684 requiring the Agency for Health Care Administration to
685 seek approval from the federal Centers for Medicare and
686 Medicaid Services to use the highest maximum income
687 threshold allowed by federal law or regulation, which is
688 up to 300 percent of the most recently stated federal
689 poverty limit; providing an alternative eligibility
690 standard pending approval of the request; amending s.
691 409.821, F.S., relating to a public-records exemption;
692 specifying that such provision does not prohibit an
693 enrollee's parent or legal guardian from obtaining
694 confirmation of coverage and dates of coverage; amending
695 s. 624.91, F.S.; conforming provisions to changes made by
696 the act; revising the powers of the Florida Healthy Kids
697 Corporation; authorizing participating health and dental
698 plans to develop marketing and other promotional materials

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699 and to participate in activities to promote the Florida
700 Healthy Kids Corporation; providing an effective date.

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Bill No. **HB 1423**

COUNCIL/COMMITTEE ACTION

ADOPTED	— (Y/N)
ADOPTED AS AMENDED	— (Y/N)
ADOPTED W/O OBJECTION	✓ (Y/N)
FAILED TO ADOPT	— (Y/N)
WITHDRAWN	— (Y/N)
OTHER	—

1 Council/Committee hearing bill: Future of Florida's Families
2 Committee

3 Representative(s) Bucher offered the following:

4
5 **Amendment**

6 Remove line 76, and insert:

7 reimbursement under Medicare program and provide
8 reimbursement for dental services at 50 percent of usual and
9 customary rates provided for dental services.

000000